

**CERTIFICATE OF MAILING (37 CFR 1.8(A))**

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on August 9, 2004.

Signed:

Laura Lee Mosier

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
JOHN H. HEANUE et al.

Serial No.: 09/491,429

Filed: January 26, 2000

For: WIDELY TUNABLE LASER

Group Art Unit: 2828

Examiner: Rodriguez, Armando

Date: August 9, 2004

TRANSMITTAL FOR AMENDMENT AFTER FINAL

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is:

- Amendment After Final;
- a TWO month extension request is hereby sought;
- Other: Supplemental IDS

The fees have been calculated as shown below:

	Claims Remaining After Amendment	Minus	Highest Previously Paid For	Present Extra	Small Entity Rate Fee	OR	Other than a Small Entity Rate Fee
Total Claims	19	-	20		x 9 = \$		x 18 = \$
Indep Claims	3	-	3		x 43 = \$		x 86 = \$
[] Multiple Dependent Claim Presented and Fee not Previously Paid				+145 = \$		+290 = \$	
				TOTAL \$-0-		TOTAL \$ -0-	

Total Additional Claims Fee:**\$ -0 -**

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- [X] Applicant hereby petitions for a TWO month Extension of Time to respond to the Official Action mailed March 8, 2004 and includes the following fee:

	<u>Small Entity</u>	<u>Large Entity</u>
[]	One month \$ 55.00	[] One month \$110.00
[X]	Two months \$210.00	[] Two months \$420.00
[]	Three months \$475.00	[] Three months \$950.00
[]	Four months \$740.00	[] Four months \$1,480.00
[]	Five months \$1,005.00	[] Five months \$2,010.00

Extension of Time Fee: \$ 210.00

- [] Fee regarding Information Disclosure Statement:
[] Fee Under 37 CFR 1.17(p) \$
[] Petition Fee Under 37 CFR 1.17(i) \$

Total Information Disclosure Statement Fee: \$.00

- [] Other fees (list individually):

Total Other Fees: \$.00
TOTAL FEES: \$ 210.00

- [X] A check including the amount of the above indicated TOTAL FEES is attached.
[] Please charge Deposit Account No. 50-2319 in the amount of \$ _____.
[] No fee is required.
[] Applicant is now a SMALL / LARGE entity.
[] The Commissioner is hereby authorized to charge any underpayment of the fees associated with this communication under 37 C.F.R. §1.20(d), including any necessary fees for extension of time, or credit any overpayment to Deposit Account No. 50-2319: (______).

Respectfully submitted,

DORSEY & WHITNEY LLP
By _____
Edward N. Bachand
Reg. No. 37,085

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